Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>01/05/2008</u>	Address:	4808 West CR 1100 South
Case #:	<u>53-20518</u>		Rcelsville, IN 46171
County:	Putnam ·		
Type of Laboratory Scizure (check one) Operational Lab Chemical/Glassware/Equipment (only)		Seizure Location (c	☐ Hotel/Motel
Dumpsi	le (only)	☐ Outbuilding ☐ Vehicle	Open – No Structure
Items Found: Location (bedroom, kitchen, open air, ctc) (check all that apply) Lithium/Animonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Ilammable Solvents: in the woods east of the residence			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s): in the woods east of the residence			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
Yes ∑No *If yes, fax repo	rage 18 discovered (check one) (number present) ort to Child Protective Services	∐ Retail/Mor ∑ Other: <u>calle</u>	Pseudoephedrine Tracking Log chant Tip ed in
This report is to be faxed to the following agencies that serve the location:			
Fire Department: <u>Reelsville FD</u> Health Department: <u>Putnam Cunty HD</u> Child Protection Service: <u>N/A</u>		Fax: <u>765-672-4768</u> Fax: <u>765-653-0211</u> Fax: <u>N/A</u>	
for further information regarding this methamphetamine laboratory, contact nvestigating Officer: <u>Trooper O'Rourke</u> Phone <u>765-653-4114</u>			
 This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing. This form is to be included with the case lile, and a copy sent to the Claudestine Laboratory Team Leader for retention. 			